

Application Deadline: n/a
Active Member at least 7 years
Previous judicial or arbitrator experience desirable.

**APPLICATION
TO SERVE AS A HEARING OFFICER OF THE SUPREME COURT OF ARIZONA**

The purposes of this form are (1) to assist in making inquiries concerning the qualifications of candidates and (2) to obtain general information for use in public releases about the selected candidates.

Name _____
Last Name First Name M.I.

Legal Residence _____
Street City State Zip County

Business Address _____
Street City State Zip County

Residence Telephone _____ Business Telephone _____

Email
Address _____

Date you became a member of the State Bar of Arizona _____ Bar
Number _____

Ethnicity (optional) _____ Gender male__ female__

Other bar affiliations _____

POST-HIGH SCHOOL EDUCATION:

Colleges/Universities/
Special Courses Location Dates Degree

EMPLOYMENT: List major paid employment during past 15 years chronologically, beginning with most recent experiences.

Dates (from/to)	Employer and Position Held	Address	Employment Reference Contact
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List major areas of law practice: _____

BAR SERVICE: List significant volunteer bar activities during past 10 years chronologically, beginning with most recent services. For example, please list if you have served as a judge (full time or as a *pro tem*), commissioner, arbitrator (including fee disputes), hearing committee chair/member, volunteer bar counsel respondent's counsel, counsel for a Client Protection Fund claimant, counsel in civil action involving professional misconduct, or other equivalent experience.

Dates (from/to)	Organization/ Position Held	Activities
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COMMUNITY VOLUNTEER SERVICE: List significant community volunteer activities during the past 10 years chronologically, beginning with most recent services.

Describe why you are interested in serving in this professional activity. Include information not already mentioned about yourself, your experience and background that support your interest.

List names, addresses and phone numbers of three people who are not in your law firm and to whom you are not related who may be contacted as references.

1) _____

2) _____

3) _____

List the names, addresses and phone numbers of five attorneys who were opposing counsel in your cases.

1) _____

2) _____

3) _____

4) _____

5) _____

DISCLOSURE STATEMENT

1. Have you ever been publicly disciplined by the State Bar of Arizona?

2. Please indicated whether you have been a respondent in a State Bar disciplinary proceeding within the last five (5) years. If yes, please indicate the final disposition of the matter, the file number if available, and the date of disposition.

3. Please indicate whether you are currently a respondent in a State Bar disciplinary proceeding. If yes, please indicate the current status, whether you are represented by counsel and any additional information you wish to disclose about this matter.

4. The information provided in this disclosure will be available only to the Disciplinary Commission who makes recommendations to the Supreme Court of Arizona. An applicant's disciplinary history may be relevant in making an appointment, but will not result in automatic exclusion of an applicant.

Date

Signature

Return completed applications to Attorney Discipline Unit, Supreme Court of Arizona, Certification & Licensing Division, 1501 West Washington, Suite 104, Phoenix, AZ 85007-3329. Telephone Number: (602) 452-3378, Facsimile Number: (602) 452-3958.